

Connecting People + Care

Curve Health is Senior Care, Connected.

By combining telemedicine, a health information exchange, predictive analytics and billing into a single platform, Curve creates a proven bridge between skilled nursing facilities, EMS and hospitals.

Experience



Rob MacNaughton + Tim Peck, MD

Team combines decades of digital health and executive experience

Top 50 Healthcare Technology CEOs of 2020 [\[Link\]](#)

"This Founder Lived in a Nursing Home..." [\[Link\]](#)

Proven Platform



Call9's best-in-class complex care telemedicine platform

50%+ Reduction in Hospital Admissions from SNF

Awards:



Industry Leading Partner

IDEO

Curve Partnered with IDEO, a top flight consulting and biz design firm

Accelerated Startups include:

PillPack
Omada Health

Hospital Care is Presently Bound by Hospital Walls

2.1 million patients are transferred to the ED from post acute facilities annually & **two-thirds**¹ of those transfers are unnecessary.

Segregated information ecosystems & traditional treatment modalities prevent data sharing, optimized billing + frictionless care.

Hospitals & SNFs suffer unnecessary costs & miss revenue opportunities in the **\$163B**² post-acute space due to information silos & care limitations.



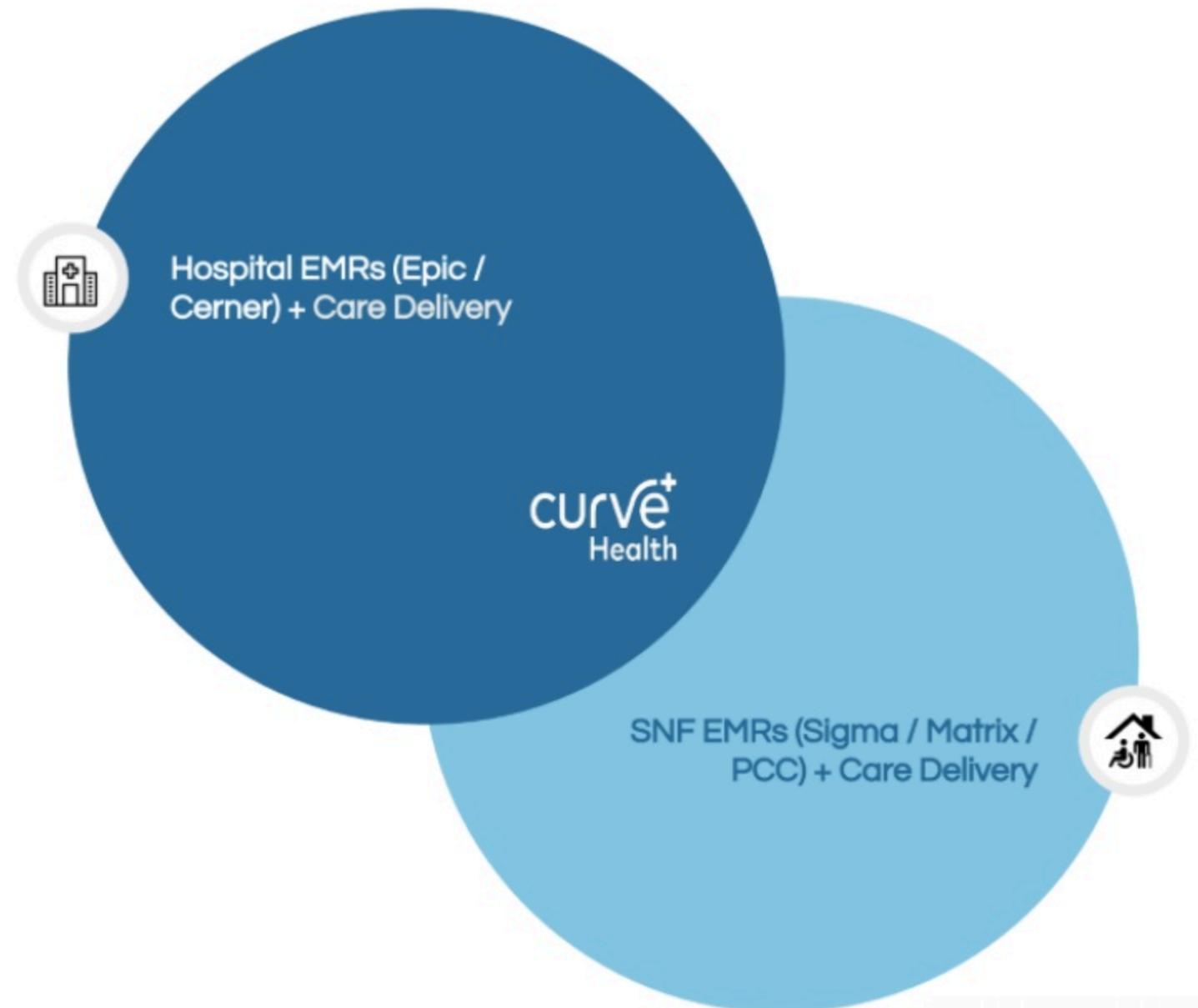
¹ "J Am Geriatr Soc. 2010 Apr;58(4):627-35

² <https://www.cms.gov/newsroom/press-releases/cms-office-actuary-releases-2016-national-health-expenditures>

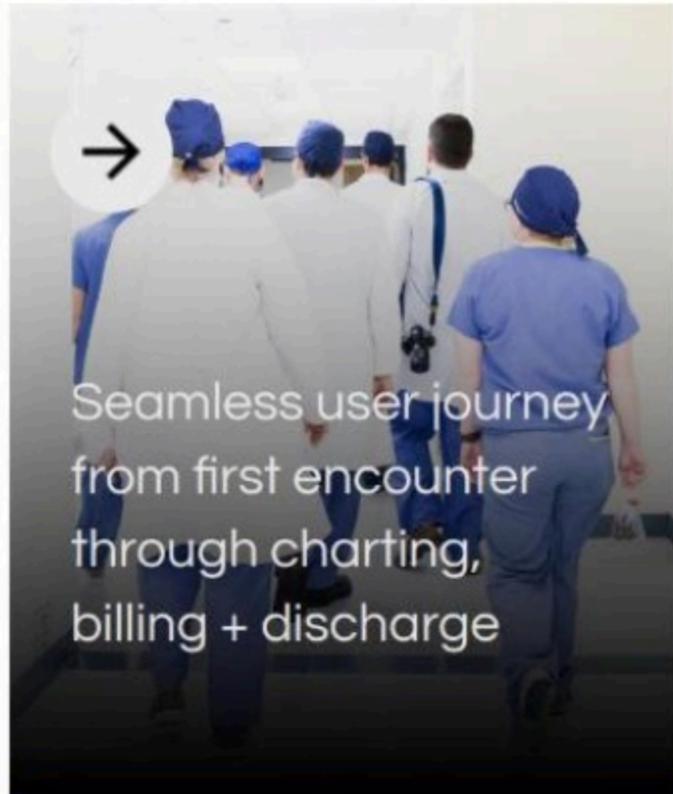
Curve Health: Information and Care Anywhere

Curve provides a missing link between Hospital + SNF information systems & incorporates new care modalities to align all stakeholders in delivering superior patient care + optimizing revenue capture.

- Health Information Exchange
- Telemedicine
- Smart Charting + Billing
- Predictive Analytics

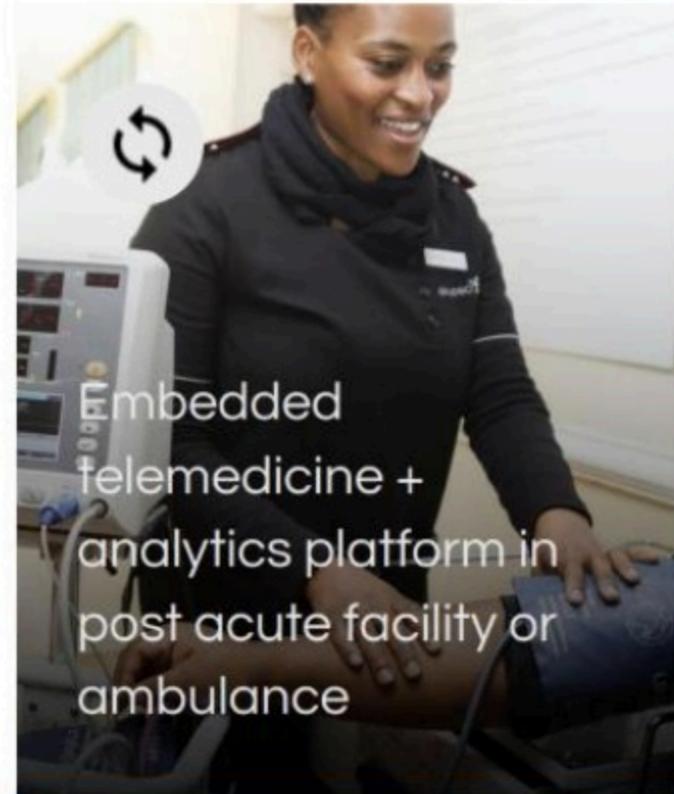


THE CURVE Model: Hospital Care in the Post Acute Setting



Seamless user journey
from first encounter
through charting,
billing + discharge

Train



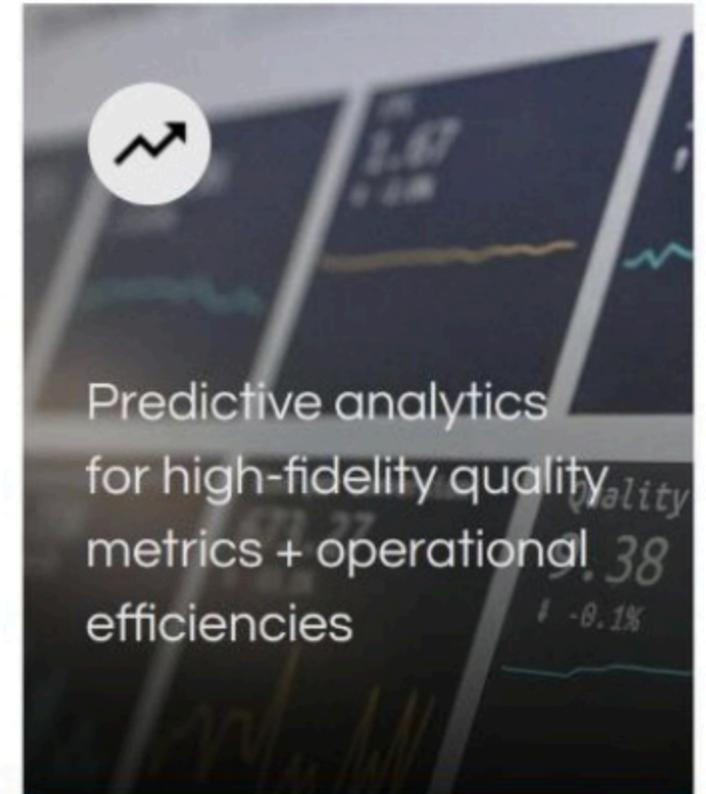
Embedded
telemedicine +
analytics platform in
post acute facility or
ambulance

Connect



Automated +
Integrated Revenue
Cycle Management
with Smart Billing

Bill



Predictive analytics
for high-fidelity quality
metrics + operational
efficiencies

Predict

THE CURVE Model: Where Care & Technology Meet

TRAIN

CONNECT

BILL

PREDICT

6

Physicians with Curve Train

Cultivate telemedicine best practices from first-use with integrated care + charting prompts.

Optimize care for complex patients with multiple comorbidities.

Seamlessly chart work for appropriate reimbursement.



TRAIN

Provider-centric patient care + billing interface
flattens telehealth learning curve + eliminates physician charting fatigue.



SNFs with Curve Train

Work collaboratively with physicians via telemedicine.

Prompts + features facilitate telemedicine presenter best practices for SNF staff.

Care in place for higher acuity patients.

THE CURVE Model: Where Care & Technology Meet

TRAIN

CONNECT

BILL

PREDICT

7

Physicians with Curve Connect

Treat multiple patients in different SNFs at the same time.

Direct + review point of care labs, X-rays, urinalysis, telemetry, EKGs.

Track + monitor patients for 24-48 hours after initial interaction.



CONNECT

Location-agnostic patient management delivers visibility into patient needs for better treatment + smarter billing.



SNFs with Curve Connect

Identify patients earlier in their change of condition.

Collect + input point of care labs, X-rays, urinalysis, telemetry, EKGs.

Round on patients after initial interaction.

THE CURVE Model: Where Care & Technology Meet

TRAIN

CONNECT

BILL

PREDICT

8

Partners with Curve Bill

Proprietary telemedicine
Superbill -- developed over 5
years of telemedicine billing to
national payors -- integrated
into hospital billing system.

Optimize revenue capture for all
billable services.

\$

BILL

Integrated SaaS model
automates transition
from chart to billing for
faster reimbursement
with less human error

\$

SNFs with Curve Bill

Identify + document patient
comorbidities, allowing
facilities to capture
appropriate revenue per
patient.

THE CURVE Model: Where Care & Technology Meet

TRAIN

CONNECT

BILL

PREDICT

9

Partners with Curve Predict

Drastically reduce 30 day readmissions from SNFs.

Expand care delivery to additional specialties, delivering more care to more patients.

Avoid unnecessary resource drain via ED visits.



PREDICT

Senior care-specific algorithm leverages usage data to deliver actionable population health, resource planning + operational insights.



SNFs with Curve Predict

Better understand the patient population, staffing acumen + resource requirements.

Flag patients to hospital for earlier intervention.

THE CURVE TAM: \$4B+



Value Across Time

Pre-COVID

ED/Hospital Utilization:

Model was shown to reduce SNF ED/hospital utilization by 50%+

Adoption:

Demand was strong and growing but adoption was slowed by misaligned incentives

Reimbursement:

Demonstrated ability to capture fee for service revenue for telemedicine and negotiate value based contracts w/payors

COVID

ED/Hospital Utilization:

Buy-in from both SNFs and Hospitals for telemedicine utilization

Adoption:

Need to flatten the curve of hospital utilization, coupled with diminished SNF resources has accelerated adoption

Reimbursement:

Telemedicine restrictions waived, potentially doubling revenue

Post-COVID

ED/Hospital Utilization:

Predictive analytics constantly improve resource allocation.

Adoption:

Additional revenue stream & stronger hospital/SNF partnerships continue to drive adoption/ensure stickiness.

Reimbursement:

"The genie's out of the bottle on this one"
- CMS Administrator, Seema Verma, on telehealth reimbursement.

The Curve Proof

Curve Product, developed on the Call9 platform has delivered best-in-class results:

Case Study 1

Patients avoided ED: 70%

SNFs Made: \$944,882

Payors Saved: \$9,503,696 *Pre Covid*

Awarded: The Academy of Geriatric Emergency Medicine (AGEM) - April 2017

Case Study 2

Patients avoided ED: 70.2%

SNFs Made: \$1,027,695

Payors Saved: \$10,336,663 *Pre Covid*

Awarded: National Association of EMS Physicians (NAEMSP) - August 2016

Case Study 3

Relative Reduction in Transfers: 38.3%

SNFs Made: \$177,568

Payors Saved: \$1,785,993 *Pre Covid*

Awarded: Society of Academic Emergency Medicine (SAEM) - May 2018

January 2019

National Association of EMS Physicians Conference

Emergency Telemedicine Supported By Onsite Emergency Responder Technicians Reduces EMS Transports And Emergency Department Visits From SNFs

May 2018

Society of Academic Emergency Medicine (SAEM)

Emergency Telemedicine Bundled with Embedded Staff Reduces Hospitalizations from Skilled Nursing Facilities

October 2018

Society for Education and the Advancement of Research in Connected Health (SEARCH)

An Emergency Telemedicine Service Bundled With Embedded Staff Reduces Transfers to the Emergency Department and Hospitalizations From Skilled Nursing Facilities

May 2017

Society of Academic Emergency Medicine. Award for best presentation from (AGEM)

Use of Noninvasive Positive Pressure Ventilation by an Advanced Emergency Telemedicine to Reduce Unnecessary Ambulance Transports and ED Visits from SNFs

May 2018

Society of Academic Emergency Medicine (SAEM)

End of Life Discussions Using Emergency Telemedicine Service (ETS) in Skilled Nursing Facilities

January 2017

Society of Academic Emergency Medicine (SAEM)

End of Life Discussions Using Emergency Telemedicine Service (ETS) in Skilled Nursing Facilities

Peer-Reviewed, Proven Clinical Efficiency



BRIEF RESEARCH REPORT

Reducing Emergency Department Transfers from Skilled Nursing Facilities Through an Emergency Physician Telemedicine Service

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"Overall, only 27% of the intervention group was transported to the ED for additional care and presumed admission, whereas 71% of the comparison group was admitted (OR for admission = 0.15 [9% confidence interval, 0.13-0.17])."

The Curve Team



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Strategic
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Committee

Clinical
Operations
Experts

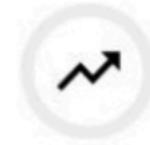
IDEO Business
Design &
Healthcare
Experts

RAISE: \$5-\$6M Seed Round



Research and Development

- Ensure optimal healthcare information exchange experience for hospital + SNF partners.
- Customize existing code base for immediate needs of hospital system clients
- Build out hardware and EMR integrations to best serve the needs of our hospital and post-acute care customers
- Further integrate AI, machine learning, and predictive analytics to identify changes of conditions earlier and expand care for patients before they become ill



Expansion

- Execute on existing sales channel opportunities with hospital and post acute care facilities
- Build out executive leadership team to manage sales & revenue growth.
- Integrate IDEO's training interface and UI/UX design at scale for hospital partners
- Optimize Revenue Cycle Management protocols for enhanced customer ROI and regulatory changes
- Enhance data-driven customer success

An investment of \$5-6M will allow Curve to quickly implement its solution into hospital systems + SNFs. Coupled with the know-how of the team's key executives + IDEO's network of healthcare system partners, this investment projects to accelerate the company directly into a growth stage.